# PATENT APPLICATION FEE DETERMINATION RECORD
## Effective December 8, 2004    22 NOV 200

**Application or Docket Number**
10.567993.

## CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) | SHALL ENTITY TYPE ☐ | OR | | OTHER THAN SHALL ENTITY |
|---|---|---|---|---|---|---|
| | | | RATE | FEE | RATE | FEE |
| U.S. NATIONAL STAGE FEES | | | | | | |
| BASIC FEE | SMALL ENT. = $150 | LARGE ENT. = $300 | BASIC FEE | | OR BASIC FEE | 300 |
| EXAMINATION FEE | Subject to PCT Article 35(1)-(4) = $50/$100 | All other chargers = $100/$200 | EXAM FEE | | EXAM FEE | 200 |
| SEARCH FEE | U.S. ISA = $50/$100 ALL other countries = $200/$400 | All other chargers = $250/$500 | SEARCH FEE | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | 261 minus 100 = | 4 180 | X $125 = | | X $250 = | 1000 |
| TOTAL CHARGEABLE CLAIMS | 113 minus 20 = | -23 | X $25 = | | OR X $50 = | 1150 |
| INDEPENDENT CLAIMS | 4 minus 3 = | -1 | X $100 = | | OR X $200 = | 200 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | ☑ | ÷ $180 = | | OR ÷ $360 = | 360 |
| ° If the difference in column 1 is less than zero, enter "0" in column 2 | | | TOTAL | | OR TOTAL | 3610 |

## CLAIMS AS AMENDED - PART II

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | SHALL ENTITY RATE | ADDI-TIONAL FEE | OR | OTHER THAN SHALL ENTITY RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| **AMENDMENT A** Total | ° | Minus | °° | □ | X $25 = | | OR | X $50 = | |
| Independent | ° | Minus | °°° | □ | X $100 = | | OR | X $200 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | ÷ $180 = | | OR | ÷ $360 = | |
| | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | RATE | ADDI-TIONAL FEE | OR | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| **AMENDMENT B** Total | ° | Minus | °° | □ | X $25 = | | OR | X $50 = | |
| Independent | ° | Minus | °°° | □ | X $100 = | | OR | X $200 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | ÷ $180 = | | OR | ÷ $360 = | |
| | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

° If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
°° If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
°°° If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.